



4191-02-U

## SOCIAL SECURITY ADMINISTRATION

### Agency Information Collection Activities: Proposed Request and Comment Request

The Social Security Administration (SSA) publishes a list of information collection packages requiring clearance by the Office of Management and Budget (OMB) in compliance with Public Law 104-13, the Paperwork Reduction Act of 1995, effective October 1, 1995. This notice includes revisions and one extension to OMB-approved information collections.

SSA is soliciting comments on the accuracy of the agency's burden estimate; the need for the information; its practical utility; ways to enhance its quality, utility, and clarity; and ways to minimize burden on respondents, including the use of automated collection techniques or other forms of information technology. Mail, email, or fax your comments and recommendations on the information collection(s) to the OMB Desk Officer and SSA Reports Clearance Officer at the following addresses or fax numbers.

(OMB)

Office of Management and Budget

Attn: Desk Officer for SSA

Fax: 202-395-6974

Email address: [OIRA\\_Submission@omb.eop.gov](mailto:OIRA_Submission@omb.eop.gov)

(SSA)

Social Security Administration, DCRDP

Attn: Reports Clearance Director

107 Altmeyer Building

6401 Security Blvd.

Baltimore, MD 21235

Fax: 410-966-2830

Email address: [OR.Reports.Clearance@ssa.gov](mailto:OR.Reports.Clearance@ssa.gov)

- I.** The information collections below are pending at SSA. SSA will submit them to OMB within 60 days from the date of this notice. To be sure we consider your comments, we must receive them no later than **[INSERT DATE 60 DAYS AFTER DATE OF PUBLICATION IN THE FEDERAL REGISTER]**. Individuals can obtain copies of the collection instruments by writing to the above email address.

**1. Certificate of Responsibility for Welfare and Care of Child Not in**

**Applicant's Custody -- 20 CFR 404.330, 404.339-341 and 404.348-404.349 --**

**0960-0019.** Under the provisions of the Social Security Act (Act), non-custodial parents who are filing for spouse, mother, or father Social Security benefits based on having the child of a number holder or worker in their care must meet the in-care requirements the Act discusses. The in-care provision requires claimants have an entitled child under age 16 or disabled in their care. SSA uses Form

SSA-781, Certificate of Responsibility for Welfare and Care of Child in Applicant's Custody, to determine if claimants meet the requirement. The respondents are applicants for spouse, mother's, or father's Social Security benefits.

Type of Request: Revision of an OMB-approved information collection.

<b>Modality of Completion</b>	<b>Number of Respondents</b>	<b>Frequency of Response</b>	<b>Average Burden Per Response (minutes)</b>	<b>Estimated Total Annual Burden (hours)</b>
SSA-761	14,000	1	10	2,333

## **2. Request for Change in Time/Place of Disability Hearing -- 20 CFR**

**404.914(c)(2) and 416.1414(c)(2) -- 0960-0348.** At the request of claimants or their representatives, SSA schedules evidentiary hearings at the reconsideration level for claimants of title II benefits or title XVI payments when we deny their claims for disability. When claimants or their representatives find they are unable to attend the scheduled hearing, they complete Form SSA-769 to request a change in time or place of the hearing. SSA uses the information as a basis for granting or denying requests for changes and for rescheduling disability hearings.

Respondents are claimants or their representatives who wish to request a change in the time or place of their hearing.

Type of Request: Revision of an OMB-approved information collection.

<b>Modality of Completion</b>	<b>Number of Respondents</b>	<b>Frequency of Response</b>	<b>Average Burden Per Response (minutes)</b>	<b>Estimated Total Annual Burden (hours)</b>
SSA-769	7,483	1	8	998

**3. Earnings Record Information -- 20 CFR 404.801-404.803 and 404.821-**

**404.822 -- 0960-0505.** SSA discovered as many as 70 percent of the wage reports we receive for children under age seven are actually the earnings of someone other than the child. To ensure we credit the correct person with the reported earnings, SSA verifies wage reports for children under age seven with the children's employers before posting to the earnings record. SSA uses Form SSA-L3231-C1, Request for Employer Information, for this purpose. The respondents are employers who report earnings for children under age seven.

**Type of Request:** Revision of an OMB-approved information collection.

<b>Modality of Completion</b>	<b>Number of Respondents</b>	<b>Frequency of Response</b>	<b>Average Burden Per Response (minutes)</b>	<b>Estimated Total Annual Burden (hours)</b>
SSA-L3231-C1	20,000	1	10	3,333

**4. Wage Reports and Pension Information -- 20 CFR 422.122(b) -- 0960-0547.**

Pension plan administrators annually file plan information with the Internal Revenue Service, which then forwards the information to SSA. SSA maintains and organizes this information by plan number, plan participant's name, and Social Security number. Under section *1131(a)* of the Act, pension plan participants are entitled to request this information from SSA. The Wage Reports and Pension Information regulation, *20 CFR 422.122(b)* of the *Code of Federal Regulations*, stipulates that before SSA disseminates this information, the requestor must first submit a written request with identifying information to SSA. The respondents are requestors of pension plan information.

Type of Request: Extension of an OMB-approved information collection.

<b>Modality of Completion</b>	<b>Number of Respondents</b>	<b>Frequency of Response</b>	<b>Average Burden Per Response (minutes)</b>	<b>Estimated Total Annual Burden (hours)</b>
Requests for pension plan information.	400	1	30	200

**5. Beneficiary Interview and Auditor's Observations Form -- 0960-0630 --**

SSA's Office of the Inspector General collects information through Form SSA-322, the Beneficiary Interview and Auditor's Observation form, to interview beneficiaries or their representative payees to determine if the payees are complying with their duties and responsibilities. SSA randomly selects Supplemental Security Income (SSI) recipients and Social Security beneficiaries who have representative payees as respondents for this collection.

Type of Request: Revision of an OMB-approved information collection.

<b>Modality of Completion</b>	<b>Number of Respondents</b>	<b>Frequency of Response</b>	<b>Average Burden Per Response (minutes)</b>	<b>Estimated Total Annual Burden (hours)</b>
SSA-322	1,000	1	15	250

- II.** SSA submitted the information collections below to OMB for clearance. Your comments regarding the information collections would be most useful if OMB and SSA receive them 30 days from the date of this publication. To be sure we consider your comments, we must receive them no later than **INSERT DATE 30 DAYS**

**AFTER DATE OF PUBLICATION IN THE FEDERAL REGISTER**.

Individuals can obtain copies of the OMB clearance packages by writing to

[OR.Reports.Clearance@ssa.gov](mailto:OR.Reports.Clearance@ssa.gov).

**1. Application for Widow's or Widower's Insurance Benefits -- 20 CFR**

**404.335-404.338, & 404.603 -- 0960-0004.** Since SSA needs information to make a formal determination for entitlement to widow(er)'s benefits, we use the Form SSA-10-BK to determine whether an applicant meets the statutory and regulatory conditions for entitlement to widow(er)'s title II benefits. SSA employees interview individuals applying for benefits either face-to-face or via telephone and enter the information on the paper form or into the Modernized Claims System (MCS). The respondents are applicants for widow(er)'s benefits.

Type of Request: Revision of an OMB-approved information collection.

<b>Modality of Completion</b>	<b>Number of Respondents</b>	<b>Frequency of Response</b>	<b>Average Burden Per Response (minutes)</b>	<b>Estimated Total Annual Burden (hours)</b>
SSA-10-BK Paper version	5,000	1	15	1,250
SSA-10-BK MCS version	449,000	1	14	104,767
<b>Totals</b>	<b>454,000</b>			<b>106,017</b>

**2. Statement for Determining Continuing Eligibility Supplemental Security**

**Income Payment -- 20 CFR 416.204 -- 0960-0145.** SSA uses Form SSA-8202-BK to conduct low and middle error profile telephone or face-to-face redetermination interviews with SSI recipients and representative payees. The information SSA collects during the interview is necessary to determine whether

SSI recipients met and continue to meet all statutory and regulatory requirements for SSI eligibility and whether they received, and are still receiving, the correct payment amount.

Type of Request: Revision of an OMB-approved information collection.

<b>Modality of Completion</b>	<b>Number of Respondents</b>	<b>Frequency of Response</b>	<b>Average Burden Per Response (minutes)</b>	<b>Estimated Total Annual Burden (hours)</b>
SSA-8202-BK	6,633	1	21	2,322
Modernized SSI Claims System	71,444	1	20	23,815
<b>Totals</b>	<b>78,077</b>			<b>26,137</b>

### **3. Notice Regarding Substitution of Party Upon Death of Claimant—**

#### **Reconsideration of Disability Cessation -- 20 CFR 404.917-404.921 and**

**416.1407-416.1421 -- 0960-0351.** When a claimant dies before we make a determination on that person's request for reconsideration of a disability cessation, SSA seeks a qualified substitute party to pursue the appeal. If SSA locates a qualified substitute party, the agency uses Form SSA-770 to collect information about whether to pursue or withdraw the reconsideration request. We use this information as the basis for the decision to continue or discontinue with the appeals process. Respondents are substitute applicants who are pursuing a reconsideration request for a deceased claimant.

Type of Request: Revision of an OMB-approved information collection.

<b>Modality of Completion</b>	<b>Number of Respondents</b>	<b>Frequency of Response</b>	<b>Average Burden Per Response</b>	<b>Estimated Total Annual Burden (hours)</b>

			<b>(minutes)</b>	
SSA-770	1,200	1	5	100

Date: February 4, 2013

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Faye Lipsky

Reports Clearance Director

Social Security Administration

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